



FLWEMS Paramedics Adult Protocol for the Management of:
DRUG/TOXIN INGESTION & OVERDOSE

Indications

To outline the paramedic care and management of the patient with signs and symptoms of poisoning/drug overdose including, but not limited to:

- Airway compromise
- Nausea/vomiting
- Cardiac dysrhythmias
- Dyspnea
- Shock

Procedure

1. Secure an airway as outlined in FLWEMS Paramedics Adult Protocol for the Management of Airway & Ventilation and administer supplemental **Oxygen** as needed.
2. If patient is unconscious or has an altered mental status, follow protocol for management of patient with altered mental status/unconsciousness of unknown origin.
3. Establish a minimum of one IV.
4. Administer **0.9% NaCL** or **Lactated Ringers** at rate necessary to maintain SBP >90mm/Hg.
5. Monitor cardiac rhythm and obtain 12 Lead EKG.
6. Obtain history to include substance(s) involved, amount ingested, when and how ingested. Bring substance and container with patient.
7. For hypotension or suspected tricyclic overdose call Medical Control.
8. Contact Medical Control prior to placing NG or OG tubes and lavaging.

NOTE: Be aware of gag reflex stimulus and aspirations.
9. Consider administration of **Activated Charcoal** with **Sorbitol** (Actidose) 25 grams PO or OG tube.
10. Consider administration of **Activated Charcoal** without **Sorbitol** 25 grams PO or OG tube.
11. If a narcotic overdose is suspected or confirmed, contact Medical Control and consider administration of **Naloxone HCl** (Narcan) 1-2mg IV, IM, SQ, or ET. Be aware of possible combative behavior post administration.
12. If a benzodiazepine overdose is suspected or confirmed, contact Medical Control and consider administration of **Romazicon** (Flumazenil) 0.2 – 0.5mg IVP. This medication administration **MUST** have an order from Medical Control.
13. If a tricyclic overdose is suspected or confirmed, contact Medical Control and consider administration of **Sodium Bicarb 8.4%** IVP. This medication administration **MUST** have an order from Medical Control.
14. Transport to appropriate Emergency Department.
15. Contact medical control for further orders as needed.

CAIRA/Chemical Surety Considerations

None

Triage Considerations

Refer to S.T.A.R.T. Triage Protocol

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END OF SOP – NOTHING FOLLOWS